

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SS</i>	<i>00001</i>	<i>8/30</i>
O.I.P.E. CLASSIFIER	<i>WV</i>		<i>9/15/00</i>
FORMALITY REVIEW	<i>MA</i>	<i>830</i>	<i>11-05-00</i>
RESPONSE FORMALITY REVIEW	<i>HC</i>	<i>7N</i>	<i>05/16/03</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
" ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
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